

1631
BOX NON-FEE AMENDMENT

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Complete if Known

Application Number 09/973,862

Filing Date October 11, 2001

First Named Inventor Kelly G. AMMANN et al.

Examiner Name Unknown

Group Art Unit Unknown

RECEIVED

Total Number of Pages in This Submission 18

Attorney Docket Number

2599-104-D4

NOV 19 2001

ENCLOSURES (check all that apply)

TECH CENTER 1600/2900

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Preliminary Amendment
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Supplemental Application Data Sheet
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	REMARKS:	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SUBMITTED BY:		Complete (if applicable)		
NAME AND REG. NUMBER	Richard Wydeven, Registration No. 39,881			
SIGNATURE		DATE	11/15/01	DEPOSIT ACCOUNT USER ID 02-2135